



# Public Service Commission of Wisconsin

Eric Callisto, Chairperson  
Mark Meyer, Commissioner  
Lauren Azar, Commissioner

610 North Whitney Way  
P.O. Box 7854  
Madison, WI 53707-7854

Public Service Commission of Wisconsin  
RECEIVED: 05/25/10, 11:30:26 AM

May 25, 2010 – Via E-mail

Ms. Melanie Krause, Co-General Manager  
Menasha Electric & Water Utilities  
E-mail: mkrause@wppienergy.org

Re: Application to Increase Water Rates

3560-WR-106

Dear Ms. Krause:

Enclosed you will find appearance slips and instruction sheets for utilities and for citizen participants which should be copied and given to members of the public attending the hearing. Below are the exhibits I expect will be entered into the record at the hearing. You should make copies available to any persons requesting them.

Exhibit 1 - Customer Notice	PSC Ref No. 130628
Exhibit 2 - Utility Application	PSC Ref No. 124898
Exhibit 3 - Utility Acceptance of Revised Revenue Requirement	PSC Ref No. 129882
Exhibit 4 - Revised PSC Staff Revenue Requirement	PSC Ref No. 129521
Exhibit 5 - Corrected PSC Staff Rate Proposal	PSC Ref No. 132033

These materials will facilitate a better understanding of the telephonic public hearing process and allow all participants a common understanding whenever the exhibits are referred to during the hearing. Hearing attendees who wish to have their attendance noted for the record should fill out an appearance slip. At the conclusion of the hearing, please upload the appearance slips to the Electronic Regulatory Filing (ERF) System at [http://psc.wi.gov/apps35/erf\\_public/Default.aspx](http://psc.wi.gov/apps35/erf_public/Default.aspx).

If you have any questions, please call me at (608) 266-1282.

Sincerely,

Andrew Behm  
Public Utility Rate Analyst  
Division of Water, Compliance and Consumer Affairs

**PUBLIC SERVICE COMMISSION OF WISCONSIN****Appearance Slip**

(please print clearly)

Docket Number and Title		Hearing Date
Name	Title	
Street, Rural Route Number, or P.O. Box Number		
City	State	Zip Code
Telephone Number	E-Mail Address	
Representing <input type="checkbox"/> Self <input type="checkbox"/> Employer <input type="checkbox"/> Organization		
Do you wish to testify? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Undecided	Would you like to receive a copy of the Commission's decision? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Appearance <input type="checkbox"/> AS INTEREST MAY APPEAR <input type="checkbox"/> IN SUPPORT <input type="checkbox"/> IN OPPOSITION		
Signature		

If you would like to provide written comments instead of oral testimony, please use the remainder of this sheet and other pages, if necessary, for your written comments. The admission of written comments into the hearing record is subject to parties' objections. Your signature above affirms that your written comments are true and correct to the best of your knowledge and belief.